Kaul Committee Report

2336. SHRI SANTOSH BAGRODIA:
SHRI HARISH RAWAT:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that CGHS system is facing acute shortage of doctors;

(b) if so, the details thereof;

(c) whether Government have constituted a Committee to look into the functioning of CGHS and if so, the mandate of the Committee;

(d) if so, whether the Committee has submitted its report;

(e) if so, the details of its recommendations; and

(f) if not, the reasons for delay in submitted the report?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH **AND** FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) **No,** Sir, against sanctioned strength of 1676 posts in GDMO and non-teaching specialist doctors sub-cadre of Central Health Service, 198 clear vacancies exist at present. Requisitions have been sent to UPSC **for** filling up these vacant posts;

(c) Yes, Sir. Terms of the Reference of the Committee is given in the Statement (See below).

(d) No, Sir.

(e) and (f) The Committee has so far held 12 meetings and on the suggestions of the Committee during the deliberations the following measures have been initiated:—

(i) Computerisations of CGHS dispensaries at Laxmi Nagar Delhi as a pilot project has been running successfully. Installation of computer hardware, data entry, and internet connectivity has been completed in the CGHS dispensaries in North Avenue, South Avenue and Parliament Annexe. Computerisation of CGHS dispensaries in Delhi has also been taken up in remaining CGHS dispensaries.

(ii) Dispensary level advisory Committee have been constituted in dispensaries comprising of the CMO in-charge, Area Welfare Officers and representatives of beneficiaries to consider various grievances of beneficiaries and also try to make local level improvements in the functioning of the dispensaries.

(iii) As recommended by Kaul Committee more powers have been delegated to Zonal Additional Directors to decentralize the functioning of CGHS, Medical reimbursement claims and bills of local chemists are no longer required to be processed at CGHS headquarters. Delibrations on the review of the functioning of C.G.H.S, have not yet been completed by the Committee.

Statement

Terms of the Reference of the Committee

No. 5-6/2004/CGHSA/C/Pt./CGHS(P)
Government of India
Ministry of Health and Family Welfare
(Department of Health)

Nirman Bhavan, New Delhi
Dated the 6th May, 2005

ORDER

Subject: Setting up of a Committee under the Chairmanship of Shri P.K. Kaul to review the functioning of the CGHS and forgiving recommendations for making it more user-friendly-regarding—

The undersigned is directed to state that the matter regarding review of the functioning of CGHS has been drawing the attention of the Govt, for some time past. It has now been decided to constitute a Committee under the Chairmanship of Shri P.K. Kaul to review the functioning of the CGHS and for giving recommendations for making it more user-friendly. The members of the Committee would be as under:—

(i) Shri P.K. Kaul, former Cabinet Secretary — Chairman

(ii) Shri Javed A. Chaudhary, former Health Secretary — Member

(iii) Dr. S.P.Agarwal, DG (Health Services) — Member

(iv) Joint Secretary in the Department of Health dealing with CGHS — Member

v) Dr. P.K. Phukan, Director, CGHS — Member Secretary

2. The Committee shall look into the functioning of the CGHS scheme and make recommendations for making it more user-friendly. Some of the illustrative areas that may be looked into include:—

(i) Availability/shortage of medicines (including life saving medicines) in the CGHS dispensaries.

(ii) Delay in the supply of indented Medicines to the CGHS beneficiaries through the CGHS authorized local chemists.

(iii) Quality of medicines, spurious/substandard supplied to the beneficiaries.

(iv) Substitution of medicines with a different brand name medicine by the CGHS authorized local chemist, Grievance of beneficiaries due to non-availability of CGHS authorized local chemist for the particular dispensary, and inconvenience caused to the CGHS beneficiaries due to Strike by the CGHS authorized local chemists.

(v) Pending madical claims of CGHS beneficiaries resulting in delay in the reimbursement of medical expenses to the beneficiaries.

(vi) Availability of Specialist OPD consultation for the CGHS beneficiaries.

(vii) Quality of diagnostic/pathology services given by the CGHS laboratories/CGHS Polyclinic to the beneficiaries.

(viii) Quality of Indoor (IPD) services and diagnostic/investigation facilities given to the CGHS beneficiaries at the CGHS recognized private hospitals and at the Central Government/State Government hospitals and Institutions.

(ix) Punctuality/behaviour of the CGHS doctors and staff at the CGHS dispensaries towards the beneficiaries, Cleanliness and availability of the basic minimum infrastructure and equipment in the CGHS dispensaries.

(x) Ratio of Patients *vis-a-vis* Doctor (including support staff) keeping in view the average monthly attendance in the various dispensaries.

(xi) Suggest measures to reduce/stop misuse of CGHS facility.

3. The Committee will also look into and suggest changes with respect to the financial viability of the scheme in view of the rapidly increasing expenditure in CGHS. The Committee may suggest alternative cost effective models of healthcare provisioning to Government employees as well as alternative sources of financing the CGHS. The Committee may also suggest changes in the following:—

(i) Monthly CGHS contribution rates to make the CGHS scheme more viable.

(ii) Converting the CGHS organization, a Subordinate Office under the Directorate General of Health Services, into a Corporation on the lines of the Employees State Insurance Corporation (ESIC).

4. Each non-official member in the above Committee would be given a lump sum amount of Rs. 50,000/- with TA/DA as admissible under SR-190 and instructions there under for all the meetings of the Committee that are held in Delhi/New Delhi.

5. This issues with the concurrence of the Finance Division *vide* their Diary No. C-233/2005-IFD dated 3.5.2005.

Sd/-

(AJAY AGGARWAL) Deputy Secretary to the Govt, of India.

To

1. Shri P. K. Kaul, former Cabinet Secretary
2. Shri Javid A. Chowdhury, former Health Secretary
3. Dr. S.P. Agrawal, DG (Health Services)
4. Joint Secretary in the Department of Health dealing with CGHS
5. Dr. P. K. Phukan, Director, CGHS
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